

# Tanque Verde Community Programs Youth Class Registration Form

**YOU MUST PRE-REGISTER** *If registration is received after deadline, late fees apply!*

*Forms can be dropped off at any school office.*

Student's Name \_\_\_\_\_  
 Grade \_\_\_\_\_ Teacher \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Email \_\_\_\_\_ Cell # \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Email \_\_\_\_\_ Cell # \_\_\_\_\_

Class Title	Day/Time	Location	Class Fee

**Payments must be made payable to Tanque Verde School District (TVSD) in the form of a check or money order. NO CASH PAYMENTS WILL BE ACCEPTED**

Late Fee \_\_\_\_\_  
 Total \_\_\_\_\_

Emergency Contact Names (Please Provide 2) Phone Numbers

\_\_\_\_\_

\_\_\_\_\_

I recognize the risks of illness and injury inherent in any program and am participating in the express agreement and understanding that I am hereby waiving and releasing the instructors and Tanque Verde Community Programs from and against all claims, costs, liabilities, expenses or judgments, including attorney's fees and court costs arising out of participation in the program. I hereby agree to the above statement and am releasing Tanque Verde Community Programs and it's associates of any financial and/or medical obligation which might be incurred. The following signature authorizes Tanque Verde Community Programs to pursue emergency measures on my behalf and it is my agreement to pay all costs. My signature also authorizes the use of my child's photo for future publication.

\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
**Date**

# Tanque Verde Community Programs Youth Class Registration Form

**YOU MUST PRE-REGISTER** *If registration is received after deadline, late fees apply!*

*Forms can be dropped off at any school office.*

Student's Name \_\_\_\_\_  
 Grade \_\_\_\_\_ Teacher \_\_\_\_\_  
 Mother's Name \_\_\_\_\_ Email \_\_\_\_\_ Cell # \_\_\_\_\_  
 Father's Name \_\_\_\_\_ Email \_\_\_\_\_ Cell # \_\_\_\_\_

Class Title	Day/Time	Location	Class Fee

**Payments must be made payable to Tanque Verde School District (TVSD) in the form of a check or money order. NO CASH PAYMENTS WILL BE ACCEPTED**

Late Fee \_\_\_\_\_  
 Total \_\_\_\_\_

Emergency Contact Names (Please Provide 2) Phone Numbers

\_\_\_\_\_

\_\_\_\_\_

I recognize the risks of illness and injury inherent in any program and am participating in the express agreement and understanding that I am hereby waiving and releasing the instructors and Tanque Verde Community Programs from and against all claims, costs, liabilities, expenses or judgments, including attorney's fees and court costs arising out of participation in the program. I hereby agree to the above statement and am releasing Tanque Verde Community Programs and it's associates of any financial and/or medical obligation which might be incurred. The following signature authorizes Tanque Verde Community Programs to pursue emergency measures on my behalf and it is my agreement to pay all costs. My signature also authorizes the use of my child's photo for future publication.

\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
**Date**